Department of Natural Resources Private Water Systems Section - DG/RKING WATER & Chigh Capacity, School or Wastewater Treatment Plant Well Approval Application

3/201/2/1/2

Notice: Prior department approval is required for the construction, reconstruction or operation of a high capacity well or system of high capacity wells, a school well or a wastewater treatment plant well in accordance with Section NR 812.09(4)(a), Wisconsin Administrative Code. Personally identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a well or wells on a high capacity property, seek approval to make other changes to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or

more duplexes is regulated under ch. NR 8	311, Wis.	Adm. Code. See NR 8	311.01, Wis. Ac	lm. Code for	applicability requ	irements	•			
Applicant Information		The first section of the section of								
Application Prepared By (Name and Title)			Company							
Alan Hansen, General Manager			Kimmes-Bauer Well Drilling, Inc.							
Street Address			City			State	ZIP Code			
22100 Lillehei Avenue			Hastings			MN	55033			
Telephone Number	one Number Fax Number			E-Mail Address						
(651) 437-1973	651) 437-1973 (651) 437-6394			kimmesbauer@gmail.com						
Property Ownership Information					- Ou					
Property owner, if different than applicant	(Name	of Person and Title)	Company							
Peterson Family Real Estate			Peterson Family Dairy Inc.							
Street Address			City State ZIP Code							
W10322 State Highway 29			River Fa	River Falls			54022			
Telephone Number	Fax N	umber		01022						
Well Operator Information							1			
Well operator if different than owner (Nam	ne of Pe	rson and Title)	Company							
Brad Peterson		52	a 18							
Street Address			City	City			ZIP Code			
312 Glen Meadow Street			River Falls			WI	54022			
Telephone Number	Fax N	umber		E-Mail Add	ress	1 **1	04022			
715-307-3502										
Property Information										
Enter the High Capacity Well File Number is property at the time of application, enter "N or use the compact disk of departmental we "Location" section. File number format is as	ONE." 1 ell data t	NOTE: Find the file num hat is issued to drillers a	ber in upper rig and pump insta	ght hand cor illers. On the	ner of the most re compact disk, se	cent high e "File lo	capacity well approval, cation" in red print in			
County				High Capacity Well File No.			No.			
Pierce River Falls				None						
Submittal Purpose										
Check all that apply:										
Install one or more new wells with	а сара	city greater than 70 g	gallons per m	inute.						
Install one or more new wells with	а сара	city less than 70 galle	ons per minu	te on a higl	h capacity prope	erty.				
Replace one or more wells with a	capacit	y greater than 70 gal	lons per minu	ite.						
Replace one or more wells with a	capacit	y less than 70 gallons	s per minute	on a high c	apacity property	<i>'</i> .				
Reconstruct one or more wells with	th a cap	acity greater than 70	gallons per r	minute.						
Reconstruct one or more wells with					gh capacity prop	erty.				
	Increase pumping rate in one or more wells to a rate greater than previously approved.									
Request continued operation of hi		107	187	54 1951/81		equired	.)			
Renew a previous approval that h				CONTRACTOR IN CONTRACTOR			•			
Well (or wells) will serve a school	127		nt. See defin	itions on pa	age 5.					
Other, explain		ranco overcosto estruptora adoptavastorila (1. 1. 1. 1. 1.	100100 - 10010011701000 FUE WA		war ♥ option (C) (EPA)					

Form 3300-256 (R 7/05)

Page 2 of 6

Site	Statu	s Information
and t	he in	the site status using the internet or the compact disk of departmental well data that is issued to drillers and pump installers formation supplied by the property owner. Internet address is dnr.wi.gov/org/water/dwg/dws.htm . Enter YES or NO for each owing questions.
YES		Has the property boundary changed since the most recent high capacity well approval was issued? If the property is not yet a high capacity property, check NO.
	X	Has there been a change in well ownership since the last approval was written?
		If YES, name of current owner: Date of purchase:
	X	Has there been a change in well operator since the last approval was written? If YES, name of current operator: Date of change:
	X	Will a proposed well be connected to a plumbing system that is supplied by other sources (other wells, municipal supply, etc.)? If YES, include a schematic drawing showing backflow protection.
	X	Is a proposed well within 1,200 feet of a landfill? Determine if there are any landfills nearby, using the well information compact disk FIND feature. Enter the township, range and section of the well location. If the well is near a section line, also check the adjacent section or sections.
		If YES, list the landfill site ID Number: OR Landfill location: (Township/Range/Section)
	X	Is a proposed well on a property that has a contaminated site? If YES, list the BRRTS (Bureau for Remediation and Redevelopment Tracking System) Number here and specify if the site is open or closed:
	X	Is a proposed well on a property that has a groundwater use restriction recorded on the deed? If YES, list the BRRTS number, as assigned to the contaminated site by the DNR remediation and redevelopment program:
	X	Is a proposed well on a property that is listed on the department's registry of closed remediation sites for a groundwater use restriction? See compact disk or internet at maps.dnr.state.wi.us/imf/dnrimf.jsp?site=brrts . If YES, list the BRRTS Number here:
	X	Is a proposed well to be used for a public water supply system that serves 25 or more people? See definition of a "public water system" in the definitions section on page 5.
	X	Is a proposed well to be installed within a special casing area? Refer to the list of special casing areas that is published by the department and/or contact the regional DNR office.
	X	Has the number of wells or pumping capacity in an existing well increased since the most recent high capacity well approval was issued?
	X	Has the number of wells decreased since the most recent high capacity well approval? If the property is not yet a high capacity property, check NO.
	X	Is a non-pressurized storage vessel (i.e. reservoir) other than a pond proposed or in use?
	X	Will the well discharge directly to a storage pond?
	X	Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in use?
	X	Is a proposed well within 1,200 feet of a quarry?
	X	Is a proposed well located in a floodplain or floodway?
	X	Are any existing well installations on the high capacity property out of compliance with Chapter NR 812, Wisconsin Administrative Code?
	X	Will the well be used as a source of bottled water?
	X	Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards?

☐ X Is the property served by a community water system?

Existing Well Information																
Enter the following information on	all existir	าg พย	ells on	the į	property, i	f more	e thar	n four	wells,	submi	t addit	ional s	sheet	s:		
Well Name Assigned by Well Owner (North Well, etc.):	Dair	y			Hou	ise										
Well Number Assigned by Owner (001, 002, etc.):	#1				#2	2					·					
WI Unique Well Number or NA If no number:	UX	862			G	R823	3									
Permanent DNR High Capacity Well Number or N/A if none:	NA					NA										
Public Water System ID Number, if Public (if not public, NONE):	Nor	ne				Vone	,									
Potable or Non-Potable Use:	Pot	able			P	otable	е									
Type of Well (Irrigation, Industrial, Residential, etc.):	Res	sider	ntial		Re	siden	itial									
Requested Average Water Usage per Day in Gallons:																
Requested Maximum Water Usage per Day in Gallons:																
Seasonal? (April to October, Year Around, etc.):	Year A	rour	nd		Yea	r Aro	und									
Approved Pumping Capacity If Previously Approved (gpm):																
Current Pump Type & Capacity (gpm):	Submer	sible	20.0	3PM	Subme	reihle	10 t	GPM	4							
Proposed Pump Type & Capacity if Change Requested (gpm):					Cubino	01010	, 10	<u> </u>								
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	Pitle	ess	***************************************		Pi	lless										
Discharge Location (Building Pressure Tank, Pond, etc.):	Pre	ssur	e Tar	nk	Pres	sure	Tanl	ζ								
Height of Well Casing Above Ground in Inches:	1:	3"			1	12"		************								
Potential Contaminant Sources and Distance:	Ba	rn 70	0'		Sewei	· Pipe	e 45'									
Well Loc: Quarter Quarter Section	SE	1/4 of	SW	1 1/4	SE	1/4 of	SV	V 1/4		1/4 (of	1/4		1/4	of	1/4
or Government Lot Number	_				_			•					1			
Section or French Long Lot No.	3	2				32										
Township:	т 27		-	N	т 27			N	<u></u>			N	lτ			N
Range (Select E or W):	я 19		ΠEI		R 19	1	Π _E [Xw	R		ΠE		1		ПЕ	_
Latitude (Degrees and Minutes)	44 0	49	9175	; ;		491		,	i i	Ò		1		ġ		, hanned , i -
Longitude (Degrees and Minutes)	-92 º	39	9132		-92 º		9081	 ,		<u> 0</u>		,		Ŷ.		,
GPS Map Datum (WGS84, WTM91, etc.)			***************													
Include as much of the following inform well construction record is attached, ap	nation as p oplicant ma	ractica y leav	al for w ve the t	rells ti follow	nat do not l ing rows bi	iave w ank.	rell co	nstruc	tion red	ords at	tached	to the	applic	ation, ho	wever i	f the
Date of Construction:																
Drilled by (Name of Drilling Firm):																
Drilling Method(s) (Rotary, Percussion, Etc.)																
Well Depth in Feet:																
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	Inch	es.		feet	inch	es.		feet		nches,		feet		inches.	,	feet
Lower Drillhole Diameter in Inches and Depth in Feet:	Inch			feet	Inch			feet		nches,		feet		inches,		feet
Well Casing Dlameter in Inches and Depth in Feet:	Inch			feet	Inch			feet		nches,		feet		inches,		feet
Well Casing Material and Wall Thickness:																
Annular Space Material Between Casing and Drillhole Wall:																
Is There a Well Screen (Y or N) If so, Screen Material?:																

Proposed Well Information		
Enter the following information on all	proposed wells on the property, if more than two wells or alternate construction, submit a	dditional sheets:
Well Name Assigned by Well Owner (North Well, etc.):	South Irrigation	
Well Number Assigned by Owner (001, 002, etc.):	#3	.,,,,
Well Loc: Quarter Quarter Section or French Long Lot Number	NE 1/4 of NE 1/4 of Section 23 1/4 of 1/4 of	Section
or Government Lot Number		
Township & Range (Select E or W)	T 27 N,R 19 □E 🔀W T N,R	□E □w
Latitude (Degrees and Minutes)	<u>44</u> º 49058 ' º	1
Longitude (Degrees and Minutes)	92_ º 39148 ' º	1
GPS Map Datum (WGS84, WTM91, etc.)		
Type of Well (Irrigation, Industrial, Residential, etc.):	Type: Irrigation Potable Type:	Potable Non-Potable
Drilling Method(s) (Rotary, Percussion, Etc.):	Rotary	
	Depths that Are Expected During Drilling:	
Material and Depth Interval:	Clay from 0 to 8 ' from	0' to
Material and Depth Interval:	Sandrock from 8 to 40 from	' to
Material and Depth Interval:	Limestone from 40 to 200 from	' to '
Material and Depth Interval:	Sandrock from 200 to 400 from	' to '
Material and Depth Interval:	from ' to ' from	' to
Drilihole Diameter and Anticipated Dep		
Diameter and Depth Interval:	24" from 0 ' to 40 ' from	' to '
Diameter and Depth Interval:	17" from 40 to 147 from	' to
Diameter and Depth Interval:	12" from 147 to 400 from	' to '
Permanent Casing or Liner Diameter a	nd Wall Thickness at Anticipated Depth Intervals:	
Diameter and Wall Thickness at Depth Interval:	18 "diam/ .375 " thick 0' to 40 ' "diam/ " thick	0 ' to '
Diameter and Wall Thickness		
at Depth Interval: Permanent Casing or Liner Material , I	12 "diam/ .375 "thick 0 to 147 "diam/ "thick	' to '
Casing Joints (Welded, T and C,		
etc.)	Welded	
Material and Welght at Depth Interval:	Steel /70.59 bs/foot 0 to 40 ' / bs/foot	0 ' to '
Material and Weight at Depth Interval:	Steel /49.56 bs/foot 0 to 147 / bs/foot	' to '
Screen Material, Slot Size in Inches and Depth Interval or N/A if none:	/ "/ 'to ' / "/	' to '
Casing to Screen Joint (Welded, T and C, K Packer, etc.)		
Annular Space Material Including Filter	r Pack Material, If Used:	
Material and Depth Interval:	Neat Cement / 0' to 40 '	0 ' to _ '
Material and Depth Interval:	Neat Cement / 0 · to 147 ·	' to
Proposed Average Water Usage Per Day in Gallons:	576,000	
Proposed Maximum Water Usage Per Day in Gallons:	1,000,000	
Seasonal? (April to October, Year Around, etc.):	June through September	
Proposed Pump Type & Capacity (gpm):	Submersible 800 GPM	
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	Over the top	
Discharge Location (Building Pressure Tank, Pond, etc.):	Center Pivot	
Distance and Direction to Nearest Public Utility Well & Well Name:	2 1/2 miles NE BG683 City of River Falls	
Distance to Other Potential Contaminant Sources: Distance to Other Potential	1,180' North Septic	
Contaminant Sources:		
Leave Blank, for Department use only		

Required Attachments

- 1. Attach one of the maps described in A. or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Well Number or a Permanent High Capacity Well Number, plot the well locations with one of those numbers.
 - A. Copy of a plat map with the property boundary clearly shown. If the property is contiguous with properties owned by the same owner in another township, include a copy of that township map too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the map.
 - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
- 2. Sketch map showing all of the following that are planned or exist within 300 feet of each proposed well: proposed well location; other wells; property boundary; wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If no pertinent features to map within 300 feet of the proposed well, for example an irrigation well in the middle of a field, state that on the property map listed above and plot the well locations on that map.
- 3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or site well number on the record that correlates to the well name or number plotted on the maps.
- 4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
- 5. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components are buried or above ground. If there is more than one check valve within the well casing, include in-well check valves on the schematic.
- 6. If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
- 7. If the application is for a high capacity well or wells, a \$500.00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

Certification and Applicant Signatures

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and incomplete applications will not be approved.

By signing this form, the person signing this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR 812, Wis. Adm. Code. The person also certifies that to the best of his or her knowledge, all information in the application is accurate and correct.

Name - Print	Check Box	
Alan Hansen	Owner	X Agent of the Owner
Signature	Company	Date
ala Hanse	Kimmes-Bauer Well Drilling, Inc.	02/10/14
Application submittal. Mail completed application Section - DG/2, PO Box 7921, Madison WI 53707	and payment with all required attachments to DNR, Priv 7-7921.	vate Water Systems
Definitions from Wisconsin Administrative Cod	les	
Hilliah annah tarah in annah a	- Li-L h (ND 040 07/04))	

"High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate. [NR 812.07(53)]

"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR 812.07(80)]

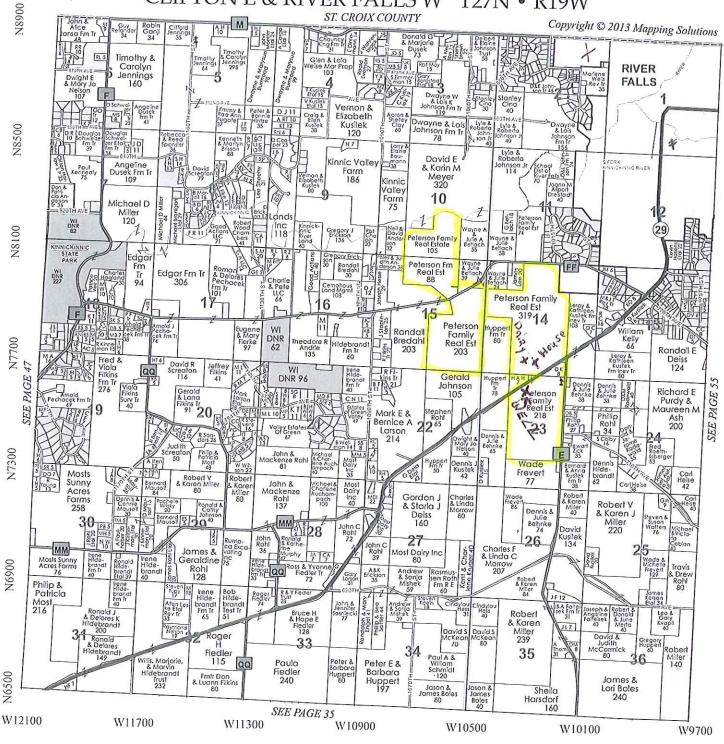
"School" means a public or private educational facility in which a program of educational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers, home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

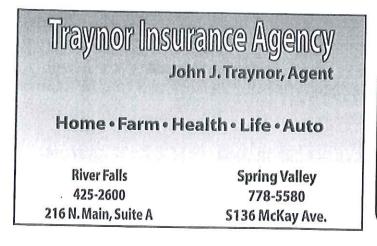
"Wastewater treatment plant" means any facility provided for the treatment of sanitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private sewage systems in s. 145.01(12), Stats. (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]

[&]quot;High capacity well" means a well constructed on a high capacity property. [NR 812.07(51)]

[&]quot;High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

CLIFTON E & RIVER FALLS W T27N • R19W





Page Family Dentistry

-SOMETHING TO SMILE ABOUT
107 E. Locust Street • River Falls, Wisconsin 54022
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If unable to keep appointment, please give 24 hour notice.